

M. JODI RELL
Governor

Gregory R. Everett
Chairman

STATE OF CONNECTICUT



TELEPHONE
(203) 805-6605

FAX
(203) 805-6655

BOARD OF PARDONS & PAROLES
55 West Main Street - Waterbury, CT 06702

Rasa Pakalnis, Pardon Board Coordinator
55 West Main Street, Suite 520
Waterbury, CT 06702
(203) 805-6607

Dear Petitioner,

Enclosed are forms for requesting a Non-Inmate Pardon. After obtaining your records, prepare forms as outlined on the enclosed procedure sheet.

Your petition package should consist of an original complete set and 4 complete identical duplicate sets; i.e. 5 fully collaged sets, each set individually stapled or clipped together with binder clips (not paper clips) for each county in which you have had convictions. **DO NOT STAPLE IDENTICAL FORMS TOGETHER! A SET MEANS ONE OF EACH DIFFERENT FORM OR DOCUMENT.** If you were convicted in more than one county – submit one (1) additional set. Example: If you have convictions in two (2) counties, submit one (1) original complete set and five (5) complete, identical sets. If three (3) counties, send one original, complete set and six (6) identical sets (etc.).

All documents must be sent to the above address via U.S. Mail. PERSONAL DELIVERIES WILL NOT BE ACCEPTED. Petitions not completed in accordance with these instructions will not be presented for the Board's review at the pre-screening session. The Pre-Screening Session is a **CLOSED SESSION** for panel members only.

Should the review of your petition be favorable, you will receive notice and date to attend the hearing. If you are granted a hearing, you must arrange to be in attendance. Otherwise, you may be denied with prejudice.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Rasa Pakalnis".

Rasa Pakalnis
Pardons Board Coordinator

Revised 1/10/05

FOLLOW THESE PROCEDURES:

- I. **PLEASE NOTE:** A Non-Inmate Petitioner may not apply to the Board prior to the elapsing of a period of FIVE (5) YEARS from the date of his/her MOST RECENT sentence together with any term of probation.

II. **OBTAINING THE REQUIRED CRIMINAL RECORD.**

In order for the petitioner to complete the enclosed forms and for this office to provide a Certificate of Pardon, if granted, it is absolutely vital that complete and accurate records be provided when the petition is filed. The following sources of information must be contacted to accomplish this.

1. **First mail the enclosed written request form to: State Police Bureau of Identification, 1111 Country Club Road, P.O. Box 2794, Middletown, CT 06457-9294; Tel. 860-685-8480. Ask clerk to write the court disposition date on the computer printout. The State Police Bureau of Identification will no longer accept personally delivered requests for the computer printouts – only requests received by mail. There is a \$25 fee. Don't mail form or fee to Board of Pardons!!**
2. **Take State Police printout to: Superior Court Records, 111 Phoenix Avenue, Enfield, CT 06082; Tel 860-741-3714. Request a certified copy of the record. If no record is available, obtain a letter stating that fact. The Records Office requires docket numbers and disposition dates to assist you. Nominal fee is charged.**
3. **If you still need further information to complete your records, then go to the court where convicted or police department, i.e. Dept of Adult Probation, etc. You must obtain a letter from the Dept. of Adult Probation indicating the date on which you successfully discharged from any period or periods of probation.**

Since the State Police Bureau of I.D. will have only printouts of offenses for which offender was fingerprinted, it is important that the petitioner provide as much recollection as possible. Proper investigation at local and state level will insure that nothing is forgotten. **Pardons will be revoked if an arrest is not disclosed regardless of the reason.** Records of out of state convictions are not required, but they must be listed in the personal statement. Advise everyone you speak with that the record is for pardon purposes.

III **HOW TO PREPARE AND PACKAGE THIS PETITION:**

1. For more than one offense, list the first on the Petition form, then list other offenses on a separate sheet in the same format as on the form itself.
2. You must provide a personal statement. See Paragraph #10 of Statistical Information Sheet.
- 3.*** **PETITIONS NOT SUBMITTED IN THE FOLLOWING MANNER WILL NOT BE PROCESSED. Put together 5 sets of exactly the same information in which the petitioner has an offense record. EACH of the five (5) sets must include one (1) copy of each of the following documents. If you have convictions in more than one county – submit one (1) extra complete set for each additional county. (EXCEPT FOR THE AFFIDAVIT and AUTHORIZATION FORM (see (a) below) :**
 - a. **Affidavit & Authorization (one (1) originally signed and notarized and one (1) photocopy; should be included at the front of the first packet which should also contain all of the original documents being submitted)**
 - b. **Non-Inmate Petition and Statistical Information Sheet**
 - c. **Complete records**
 - d. **Notarized personal statement (See Par. 10 of Statistical Information Sheet)**
 - e. **If petitioner served a period of probation, a copy of a letter from the Department of Probation showing the date when said probation was successfully completed/terminated must be provided.**
 - f. **A minimum of 3 character reference letters addressed to the Board. Only 1 may come from a family member related by blood or marriage. (Original and 4 copies of letter required per county.) Reference letters must mention your crimes and specifically request a pardon for those convictions.**
 - g. **Any other supporting documentation you wish to include – 5 copies.**

**STATE OF CONNECTICUT
BOARD OF PARDONS & PAROLES**

AFFIDAVIT AND AUTHORIZATION

AFFIDAVIT

STATE OF _____)

Ss: Town of _____ Date: _____

COUNTY OF _____)

The Petitioner _____ being first duly sworn does depose and state as follows:

1. That he/she is over the age of eighteen (18) years and believes in the meaning of an oath.
2. That he/she does represent under the penalties of perjury that he/she has not been convicted of any other crimes in the State of Connecticut or in any other state or federal jurisdiction in addition to those offenses listed on the attached Petition for Pardon dated _____, _____ of which this Affidavit and Authorization forms a part, and, further, that as of the date and time of this Affidavit and Authorization, he/she does not have pending against him/her in the State of Connecticut or in any other state or Federal jurisdiction any criminal actions.
3. That he/she does further represent that he/she shall bring to the attention of the Board of Pardons at the scheduled date of hearing, the existence of any additional criminal matters in which said Petitioner is involved which are pending against him/her either before or at the time of this application and/or which criminal matters have developed between the date of execution of this Affidavit and the date of the Non-Inmate Session at which Petitioner is heard by the Board of Pardons.
4. That he/she does further understand that in the event a pardon is granted to the Petitioner and it is subsequently discovered that the information provided by Petitioner on said Petition together with the representations made in this Affidavit are false, incomplete and/or incorrect, that in addition to any criminal or civil penalties that may be imposed against Petitioner because of such false, incomplete or incorrect representations, the Pardon which may have been granted to Petitioner in reliance upon the truthfulness and correctness of said representations may be revoked by this Board.

The Petitioner, _____,
born in _____, _____, _____, on _____, _____,
(City) (State) (Country) Month, Day (Year)
does fully authorize any federal, state, or local agency, court, police department, correction department, etc., to provide to the Connecticut State Board of Pardons and Paroles or its designated agent pertinent information concerning any criminal record that said Petitioner may have according to records of said agency and, in addition, to furnish a copy of said complete criminal record, if requested, to THE CONNECTICUT BOARD OF PARDONS AND PAROLES, c/o Mr. Gregory R. Everett, Chairman, Board of Pardons and Paroles, 55 West Main Street, Suite 520, Waterbury, CT 06702, or its designated agent, successors or assigns as the same may be amended from time to time. Compliance with this request is specifically authorized by me.

This Affidavit and Authorization are dated this _____ day of _____, _____, by the
Petitioner who is personally known to me and who has acknowledged the same to be his/her free act and deed before
me.

Petitioner's Signature
Rev. 01/10/05

Commissioner of Superior Court L.S.
Notary Public
My Commission Expires: _____

**STATE OF CONNECTICUT
BOARD OF PARDONS & PAROLES
NON-INMATE PETITION
STATISTICAL INFORMATION SHEET**

This form **must be completed** by each petitioner first before preparation of the Petition for Pardon. It will assist you in completing the Petition forms to be submitted and will serve as a useful checklist for you to verify that the application is properly completed. One copy of this form should be attached to each of the five 5 completed sets to be filed **and returned to this office**. This form will be used to make up the docket and prepare Pardon Certificates.

1. PETITIONER'S NAME AND ADDRESS (including zip code) _____
Home Telephone No: (_____) Work Telephone No: (_____)
EMAIL ADDRESS: _____
Aliases or other names known by: _____
2. DATE OF BIRTH: _____, 19 ____ SOC. SEC. # ____ - ____ - ____
PLACE OF BIRTH: _____
3. NUMBER OF COUNTIES WHERE YOU HAVE BEEN CONVICTED IN THIS STATE: _____
4. LIST THE COUNTIES: _____
One complete set of forms is required for **each county** where petitioner has committed offenses and for which a pardon is sought. Petitioner must provide required information for **ALL CRIMINAL OFFENSES** including FELONIES and/or MISDEMEANORS. Complete record must be included. Omission of information relative to any felony or misdemeanor offense **MAY RESULT IN REJECTION OF THE APPLICATION.**
5. Have you ever been incarcerated? (Y/N) _____
When? Where? Inmate ID#(s) List on an attached sheet of paper
6. **FOR EACH OFFENSE, LIST THE FOLLOWING:**
If more than one offense, fill in the first one on this page and attach a separate sheet listing any other convictions in the same order as below: (a,b,c,d,e,f)
 - a) Date of Arrest _____ Date of Conviction _____
 - b) Town and County of Arrest _____
 - c) Where convicted: Name of Court (Superior, Common Pleas, Circuit, GA#) _____ in the City/Town of _____ and County of _____
 - d) Court Docket No: _____
 - e) Crime convicted of (not arrested for) _____
 - f) Nature of sentence: (term, whether execution was suspended; probation period; fine imposed, if any) _____
 - g) If probation was served, date on which probation was terminated: _____, _____
7. Did any of the offenses involve the use of a weapon and/or a "dangerous instrument" as defined in 53a-3(7) of the Connecticut General Statutes. See Question 4 on Petition. Provide a full disclosure of the facts in your personal statement; or in the space provided on the petition form; or on a separate sheet of paper.
8. YOU MUST PROVIDE 5 COPIES OF YOUR COURT RECORDS – See instruction sheet.
9. Is this the first time petitioner is applying to the Board for a Pardon? Yes _____ No _____ If petitioner has applied previously, state number of times and dates heard _____

10. ****** SUBMIT 1 ORIGINALLY SIGNED AND ORIGINALLY NOTARIZED PERSONAL STATEMENT and four (4) copies.** Prepare a statement in your own words telling about yourself. **Explain when, how and why each crime was committed.** If you committed any other crimes in another jurisdiction, **not in Connecticut**, explain about them. Tell what you have done with your life since these criminal activities, show how you have changed and for how long you have been leading a law-abiding life. Give current background about your family life, your work or career, what you may have done for your community, why you feel you have changed your life and deserve a pardon

*******SEE ENCLOSED PROCEDURE SHEET FOR PACKAGING INSTRUCTIONS.*******

Date Completed: _____
 Month / Day Year Signature of Petitioner

Rev. 01/10/05



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC SAFETY

State Police Bureau of Identification

1111 Country Club Road

P. O. Box 2794

Middletown, CT 06457-9294

CRIMINAL HISTORY REQUEST FOR A PARDON

(PLEASE TYPE OR PRINT CLEARLY)

Name of Requester: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

1. Please fill in this form completely.
2. Enclose a \$25.00 check or money order payable to "Commissioner of Public Safety".
3. A fingerprint impression of your "Right Thumb" must be imprinted on this form in the space provided. You may have this fingerprint done at your local police department or you may do it yourself using an ordinary inkpad. Roll the first joint of the "Right Thumb" on the pad from right to left and repeat this process rolling the thumbprint on this form. If for any reason you must use another finger please indicate which finger you used. We must have this fingerprint to assure positive identification.

PLACE PRINT OF "RIGHT THUMB" HERE



Last Name First MI (Maiden) Date of Birth

DPS-848-C